MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO. APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED			TER SOMENT	AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
3						
4						
5					<u> </u>	
6						<u> </u>
7		4				
8 9		4				
10		3			2	
11						
12				•		
13		-,-				
14						
15 16				\rightarrow		
17				- 1		- 700
18						
19						
20 21						
22						
23						
⁻ 24						
25						
26 27						
28		12 26	- 0 - 0			-
29						
30						
31	<u> </u>					-
32 33						•
34						-13 (- 14 - 14 - 14 - 14 - 14 - 14 - 14 -
35						
36						
37						
38 39.						•
40						
41						
42						
43				-		
45	/ .					
46						
47						
48	·					
<u>49</u> 50						
TOTAL IND.		1	8	T		
OTAL DEP	·	4	37	4	<u></u>	4
TOTAL			28 1			
CLAIMS	1				15	100

	AS FILED			TER NDMENT	AFTER 2 AMENDMENT.	
·	IND.	DEP.		DEP.		
51					AIND.	DEP
52					1	
53	ļ		·			
54						
55						
56						
<u>57</u> 58			,			
59						
60						
61					<u> </u>	
62				·		
63						
64 .						
65						1
66						
67						
68						
69 70						
71				 :		ļ
72						
73						
74				•		
75					-	
76						
77						
78						
79						·
80 81						
82						
83						
84				•		
85						
86						
87				·	•	•
88						
89						
90						
91						
92						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		4		4	•	*
TOTAL DEP		4=		4		(1)
TOTAL CLAIMS	16		1 25	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		CHEST STATE

Patent and Trademark Office